

Submit 3 Copies To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM
87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO.
30-025-04470
5. Indicate Type of Lease
STATE ☒ FEE ☐
6. State Oil & Gas Lease No.
LC-031740-B

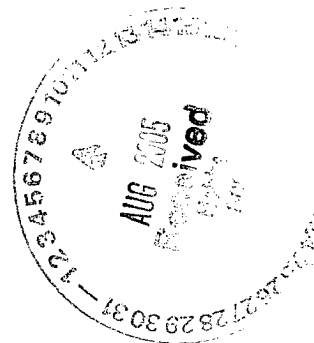
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		7. Lease Name or Unit Agreement Name EUNICE MONUMENT SOUTH UNIT
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		8. Well Number 208
2. Name of Operator XTO ENERGY INC.		9. OGRID Number 4323
3. Address of Operator 200 LORAIN MIDLAND, TX 79701		10. Pool name or Wildcat EUNICE MONUMENT SOUTH UNIT
4. Well Location Unit Letter <u>I</u> : <u>3233</u> feet from the <u>NORTH</u> line and <u>660</u> feet from the <u>EAST</u> line Section <u>4</u> Township <u>21S</u> Range <u>36E</u> NMPM County <u>LEA</u>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) RKB 3538		
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input checked="" type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5/25/05 MIRU Tst TCA to 500 psi for 15"
AZD Grayburg Perfs (3680'-3820') w/4000 gals 15% NEFE HCL 9010 acid
& 2,100 psig w/44 bbls fresh wtr.
ISIP = 1440 psig
5" 928 psig
10" 528 psig
15" 237 psig
188 BLWTR
SI 1 hr
SWAB
Max/Min press 2170/930 psig



I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Mary Lyn Marr TITLE: PRODUCTION ANALYST DATE: 08-03-2005

Type or print name MARY LYN MARR E-mail address: MaryLyn_Marr@xtoenergy.com Telephone No. 432-620-6714
For State Use Only

APPROVED BY: Larry W. Wink TITLE: OC FIELD REPRESENTATIVE II/STAFF MANAGER DATE: _____
Conditions of Approval (if any): _____

AUG 15 2005